

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		8-7-00
O.I.P.E. CLASSIFIER			2/15/01
FORMALITY REVIEW	2H	00150	9/15/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	2/12/01	
2		2/12/01	
3		2/12/01	
4		2/12/01	
5		2/12/01	
6		2/12/01	
7		2/12/01	
8		2/12/01	
9		2/12/01	
10		2/12/01	
11		2/12/01	
12	✓	2/12/01	
13	✓	2/12/01	
14	✓	2/12/01	
15		2/12/01	
16		2/12/01	
17		2/12/01	
18		2/12/01	
19		2/12/01	
20		2/12/01	
21		2/12/01	
22	✓	2/12/01	
23		2/12/01	
24		2/12/01	
25		2/12/01	
26		2/12/01	
27		2/12/01	
28		2/12/01	
29		2/12/01	
30	✓	2/12/01	
31		2/12/01	
32		2/12/01	
33		2/12/01	
34		2/12/01	
35	✓	2/12/01	
36		2/12/01	
37		2/12/01	
38		2/12/01	
39		2/12/01	
40		2/12/01	
41	✓	2/12/01	
42		2/12/01	
43		2/12/01	
44		2/12/01	
45		2/12/01	
46	✓	2/12/01	
47		2/12/01	
48		2/12/01	
49		2/12/01	
50	✓	2/12/01	

Claim	Final	Original	Date
51	✓	2/12/01	
52	✓	2/12/01	
53		2/12/01	
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64		2/12/01	
65	✓	2/12/01	
66	✓	2/12/01	
67	✓	2/12/01	
68	✓	2/12/01	
69	✓	2/12/01	
70	✓	2/12/01	
71	✓	2/12/01	
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96		2/12/01	
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99		2/12/01	
100		2/12/01	

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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